William L. Keith

US040061

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Filing Date

**DECLARATION FOR UTILITY OR** 

**DESIGN** 

**PATENT APPLICATION** 

(37 CFR 1.63)

**⊠**Declaration

□ Declaration

**Attorney Docket Number** 

**First Named Inventor** 

**Application Number** 

Submitted <b>OR</b>	Submitted after Initial	7 ming 54.0					
With Initial Filing	Filing (surcharge (37 CFR 1.16 (e))	Group Art Unit					
Fining	required)	Examiner Name					
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As a below named inventor, I hereby declare that:							
My residence, post office address, and citizenship are as stated below next to my name.							
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:							
ELECTRONIC BALLAST WITH TRANSFORMER INTERFACE							
the specification of which (Title of the Invention)							
☑ is attached hereto							
OR	20000						
□ was filed on (MM/DD/YYYY) as United States Application Number or PCT International							
Application Number	and	was amended on (MM/DD/Y	YYY)	(	f applicable).		
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.							
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.							
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant							
breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.							
Prior Foreign Application	0	Foreign Filing Date	Priority	Certified Copy	Attached?		
Number(s)	Country	(MM/DD/YYYY) Country	Not Claimed	YES	NO		
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:							

[Page 1 of 2]

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## **DECLARATION** — Utility or Design Patent Application

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		1 24/3/ 1		OR	Correspondant	ce address below	
Philips Electronics North America Corporation	en .						-
Address							
City		State					
U.S.A.						(914) 332-0615	
I hereby declare that all statements made he believed to be true; and further that these sta	atements were	made with the l	true and	that all st	ul false sta	made on information a atements and the like	so made are
NAME OF SOLE OR FIRST INVENTOR:   A petition has been filed for this unsigned inventor							
Given Name William L.  (first and middle [if any])				Family Name Keith or Surname			
Inventor's Signature & William L. &	att				Date V	- Am; 216, 20	o4
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City		State		Zip WAR		Country	
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor							
(first and middle [if any])				_		ev	7/75-1
Inventor's C. Green	Vi /	·			Date ¥	4/16/200	4
Lake in the Hills Arlington H	eights	IL		USA		Bulgaria	
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City	U	State		Zip <i>G.</i> G.		Country	
Additional inventors are being name	ed on the 1 sup	oplemental Add	litional Inv	entor(s) s	heet(s) PT	O/SB/02A attached h	ereto.
	Philips Electronics North America Corporation Name  Address  City  U.S.A.  Country  I hereby declare that all statements made he believed to be true; and further that these stapunishable by fine or imprisonment, or both, application or any patent issued thereon.  NAME OF SOLE OR FIRST INVE  Given Name (first and middle [if any])  Inventor's Signature & William L. Residence: City  610 Lorraine Avenue 3766 Sonce Mailing Address  Elmhurst LAKE IN THE Hills  City  NAME OF SECOND INVENTOR:  Given Name (first and middle [if any])  Inventor's Signature & George Lefter the Hills Arling fon Herein the Hills Arling fon H	Philips Electronics North America Corporation Name  Address  City  U.S.A.  Country  I hereby declare that all statements made herein of my own believed to be true; and further that these statements were punishable by fine or imprisonment, or both, under 18 U.S.C. application or any patent issued thereon.  NAME OF SOLE OR FIRST INVENTOR:  Given Name William L.  (first and middle [if any])  Inventor's Signature & William L. **Residence: City  610 Lorraine Avenue 3766 SONGMA CIRC.  Mailing Address  Elmburot **LAKE IN THE HIIIS  City  NAME OF SECOND INVENTOR: Ap  Given Name George L.  (first and middle [if any])  Inventor's George L.  City  NAME OF SECOND INVENTOR: Ap  Given Name George L.  (first and middle [if any])  Inventor's George L.  Leke in the Hills Ar Eng four Height's Residence: City  3766 Sonoma Circle 979 W. Happfied  Mailing Address  Leke in the Hills Ar Eng four Height's City	Philips Electronics North America Corporation Name  Address  City  U.S.A.  Country  I hereby declare that all statements made herein of my own knowledge are believed to be true; and further that these statements were made with the punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and the application or any patent issued thereon.  NAME OF SOLE OR FIRST INVENTOR:  Given Name  (first and middle [if any])  Inventor's  Signature # William L.  Elmhurst LAKE IN THE HIIIS  IL  Residence: City  State  NAME OF SECOND INVENTOR:  IL  State  NAME OF SECOND INVENTOR:  George L.  (first and middle [if any])  Inventor's  Signature  George L.  (first and middle [if any])  Inventor's  Signature  George L.  (first and middle [if any])  Inventor's  Signature  George L.  (first and middle [if any])  Inventor's  Signature  Lake in the Hills Ar Ling for Heights  IL  Residence: City  State  Malling Address  Lake in the Hills Ar Ling for Heights  IL  Residence: City  State  Malling Address  Lake in the Hills Ar Ling for Heights  IL  Residence: City  State  Malling Address  Lake in the Hills Ar Ling for Heights  IL  State  State	Philips Electronics North America Corporation Name  Address  City  U.S.A.  Country  I hereby declare that all statements made herein of my own knowledge are true and believed to be true; and further that these statements were made with the knowledge punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such will application or any patent issued thereon.  NAME OF SOLE OR FIRST INVENTOR:  Given Name  (first and middle [if any])  Inventor's  Signature   William L.  Fam  or S  IL  Residence: City  State  NAME OF SECOND INVENTOR:  Lake in the Hills  Are George L.  Fam  Given Name  (first and middle [if any])  Inventor's  Signature   George L.  Fam  or S  IL  Residence: City  State  Lake in the Hills  Are Grander   Are George L.  Fam  or S  IL  Residence: City  State  1. State  Lake in the Hills  Are Grander   Are Grander   Are Grander   Are Grander   Are Grander   Lake in the Hills  Are Grander   Are Grander   Are Grander   Lake in the Hills  Are Hing to y Heights  Lake in the Hills  Are Grander   Lake in the Hills  Are Grander    Lake in the Hills  Are Grander    Lake in the Hills  Are Grander    Are Grander    Lake in the Hills  Are Grander    Are G	Philips Electronics North America Corporation Name  Address  City  U.S.A.  Country  I bereby declare that all statements made herein of my own knowledge are true and that all statements were made with the knowledge that willing punishable by fine or impresonment, or both, under 18 U.S.C. 1001 and that such willful false supplication or any patent issued thereon.  NAME OF SOLE OR FIRST INVENTOR:  Given Name  (first and middle [if any])  Inventor's Signature F. W. W. L. Root  Elimburst LAKE IN THE HITS  Elimburst LAKE IN THE HITS	Philips Electronics North America Corporation Name  Address  City State   11 U.S.A	Philips Electronics North America Corporation Name  Address  City  U.S.A.  Country  Telephone Fax  I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information a believed to be true; and further that these statements were made with the knowledge bett wilful failer statements and the punishable by fine or improvement, or both, under 18 U.S.C. 1001 and that such wilful failer statements and the properties the value of the control wilful failer statements and the properties the value of the or statements in the knowledge bett wilful failer statements and the properties of the wilful failer statements and the fill of the control wilful failer statements and the fill of the control wilful failer statements and the fill of the control wilful failer statements and the fill of the control wilful failer statements and the fill of application or any palent issued thereon.  NAME OF SOLE OR FIRST INVENTOR:  A petition has been filled for this unsigned inventor.  Given Name (First and middle [if any])  Inventor's  Signature Lake Lat the Hills  It  State  Country  NAME OF SECOND INVENTOR:  A petition has been filed for this unsigned inventor.  Family Name Groupe  Given Name Groupe  Given Name Groupe  Given Name Groupe  The first and middle [if any]  Inventor's  Signature  Lake in the Hills  Ar Ling for William  City State  Country  Citizenship

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## **DECLARATION**

## ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 1

Name of Additional Joint Inventor, if any:	☐ A petition has been filed for this unsigned inventor						
Given Name (first and midd	le [if any])	Family Name or Sumame					
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Inventor's Signature & M. C.			Date Q 0 4-16-64				
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Mailing Address 2505 Quail Cove							
Mailing Address							
City Carpentersville	ı∟ _State	60110 <b>ZiP</b>	USA Country				
Name of Additional Joint Inventor, if any:		for this unsigned inventor					
Given Name (first and midd	le [if any])	Family Name or Surname					
Inventor's Signature			Date				
Residence: City	State	Country	Citizenship				
Mailing Address							
Mailing Address							
City	State	Zip	Country				
Name of Additional Joint Inventor, if any:	☐ A petition has been filed for this unsigned inventor						
Given Name (first and midd	[if any])		Family Name or Sumame				
Inventor's Signature Date							
Residence: City	State	Country	Citizenship				
Mailing Address							
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